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APPLICATION NO.	FILING DATE	FIRST NAMED IN		rór	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.
10/763,755	10/763,755 01/23/2004		Elias Jonsson			0119-039 7623	
TITLE OF INVENTION	: DIGITAL COMMUNI	CATION SYSTEMS HA	VING DECREASED	MEMORY			
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID I	SSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	nonprovisional NO		\$300	. \$0		\$1740	04/30/2008
EXAMINER		ART UNIT	ART UNIT CLASS-SUBCLAS				
HA, DAC V		2611	375-262000	75-262000			
CFR 1.363). Change of corresponderess form PTO/SE "Fee Address" indi PTO/SB/47; Rev 03-0 Number is required. ASSIGNEE NAME AI PLEASE NOTE: Uni recordation as set forti (A) NAME OF ASSIGNAME	ess an assignee is identi h in 37 CFR 3.11. Comp	nge of Correspondence Indication form ed. Use of a Customer TO BE PRINTED ON fied below, no assignce oletion of this form is NO	data will appear on the T a substitute for filing (B) RESIDENCE: (C	p to 3 registered p natively, ingle firm (having or agent) and the attorneys or agents the printed. r type) the patent. If an as an assignment.	as a memb names of u . If no nam signee is ic	neys 1 per a 2 up to ne is 3 dentified below, the do	Patent Group PLLC
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